

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Assisted Living Federation of America

ADDRESS (number and street)

1650 King Street

Suite 602

☐Check if different
than previously
reported. (ACC)

Alexandria

VA

22314

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00338020

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Maribeth Bersani

Signature of Treasurer

Electronically Filed by Maribeth Bersani

Date

01

27

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Assisted Living Federation of America

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		57825.00
(b) Cash on Hand at Beginning of Reporting Period	69075.00	
(c) Total Receipts (from Line 19)	18700.00	32950.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	87775.00	90775.00
7. Total Disbursements (from Line 31)	2000.00	5000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	85775.00	85775.00
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Assisted Living Federation of America

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	18600.00	25750.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	100.00	4700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	18700.00	30450.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	18700.00	32950.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	18700.00	32950.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18700.00	32950.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2000.00	5000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2000.00	5000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	18700.00	32950.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18700.00	32950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 11

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)

Michel Augsburg

Mailing Address 903 Vanessa Ct

City

Windsor

State

CA

Zip Code

95492-7924

FEC ID number of contributing
federal political committee.

C

Name of Employer
Chancellor Health Care Inc

Occupation

President/CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Transaction ID: C503079

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Thomas W. Baker

Mailing Address 830 Cherry Dr

City

Hershey

State

PA

Zip Code

17033-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Meadows

Occupation

VP Sales & Marketing

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	8

Transaction ID: C500980

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Maribeth Bersani

Mailing Address 315 S. Fayette Street

City

Alexandria

State

VA

Zip Code

22314-2747

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assisted Living Federation
of America

Occupation

Senior Vice President and Dir of Publi

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	0	8

Transaction ID: C493855

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)

Thilo Best

Mailing Address 5426 Bay Center Dr Ste 600

City State Zip Code
Tampa FL 33609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon Bay Senior Commun-
ities

Occupation
Chairman & CEO

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 9 / 2 0 0 8

Transaction ID: C496552

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Richard Grimes

Mailing Address 1650 King St Ste 602

City State Zip Code
Alexandria VA 22314-2747

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assisted Living Federation
of America

Occupation
President/CEO

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 8

Transaction ID: C500789

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Michelle Hamilton

Mailing Address 830 Cherry Dr

City State Zip Code
Hershey PA 17033-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Meadows

Occupation
Vice President of Operations

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: C497265

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)

Theodore Janeczek

Mailing Address 830 Cherry Dr

City

Hershey

State

PA

Zip Code

17033-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Meadows

Occupation
EVP & CFO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: C497258

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

David C. Leader

Mailing Address 1661 Sherwood Dr

City

Hummelstown

State

PA

Zip Code

17036-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 0 8

Transaction ID: C490969

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

G. Michael Leader

Mailing Address 1070 W. Areba Ave.

City

Hershey

State

PA

Zip Code

17033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Meadows

Occupation
CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 4 / 2 0 0 8

Transaction ID: C468281

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)

Mark Ohlendorf

Mailing Address 6737 W Washington St Ste 2300

City

West Allis

State

WI

Zip Code

53214-5650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brookdale Senior Living,
Inc.

Occupation

Co-President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C503078

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Suzanne Owens

Mailing Address 830 Cherry Dr

City

Hershey

State

PA

Zip Code

17033-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Meadows

Occupation

Vice President of Operations

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 0 8

Transaction ID: C493776

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Tiffany Tomasso

Mailing Address 12834 Parapet Way

City

Herndon

State

VA

Zip Code

20171-1736

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sunrise Senior Living Inc

Occupation

Chief Operating Officer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 8

Transaction ID: C497281

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

18600.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)

DOGGETT FOR US CONGRESS

Mailing Address 1157 San Bernard

City
Austin

State
TX

Zip Code
78702

Purpose of Disbursement
Donation

Candidate Name
Rep. Lloyd Doggett

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 25

Transaction ID: D72272

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	0	8

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

Form/Schedule: **F3XA**
Transaction ID:

Assisted Living Federation of America 2008 Q3 Amendment 2.